

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

**In the Matter of the Accusation  
Against:**

**PAUL ANDREW COX, M.D.**

**Physician's and Surgeon's  
Certificate No. A118998**

**Respondent**

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**Case No. 8002015019463**

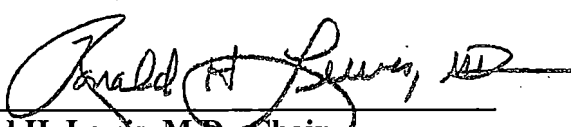
**DECISION**

**The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.**

**This Decision shall become effective at 5:00 p.m. on November 2, 2018.**

**IT IS SO ORDERED: October 5, 2018.**

**MEDICAL BOARD OF CALIFORNIA**

  
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**Ronald H. Lewis, M.D., Chair**  
**Panel A**

1 XAVIER BECERRA  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 EDWARD KIM  
Deputy Attorney General  
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8 **BEFORE THE**  
9 **MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

13 **PAUL ANDREW COX, M.D.**

14 **Physician's and Surgeon's**  
15 **Certificate No. A 118998,**

Respondent.

Case No. 800-2015-019463

OAH No. 2018040163

**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

16 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
17 entitled proceedings that the following matters are true:

18 **PARTIES**

19 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
20 of California (Board). She brought this action solely in her official capacity and is represented in  
21 this matter by Xavier Becerra, Attorney General of the State of California, by Edward Kim,  
22 Deputy Attorney General.

23 2. Respondent PAUL ANDREW COX, M.D. (Respondent) is represented in this  
24 proceeding by attorney David M. Balfour Esq., whose address is: 1925 Palomar Oaks Way, Suite  
25 220, Carlsbad, CA 92008.

26 3. On or about November 9, 2011, the Board issued Physician's and Surgeon's  
27 Certificate No. A 118998 to PAUL ANDREW COX, M.D. (Respondent). The Physician's and  
28 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in

1 Accusation No. 800-2015-019463, and will expire on April 30, 2019, unless renewed.

2 JURISDICTION

3 4. Accusation No. 800-2015-019463 was filed before the Board, and is currently  
4 pending against Respondent. The Accusation and all other statutorily required documents were  
5 properly served on Respondent on March 15, 2018. Respondent timely filed his Notice of  
6 Defense contesting the Accusation.

7 5. A copy of Accusation No. 800-2015-019463 is attached as exhibit A and incorporated  
8 herein by reference.

9 ADVISEMENT AND WAIVERS

10 6. Respondent has carefully read, fully discussed with counsel, and understands the  
11 charges and allegations in Accusation No. 800-2015-019463. Respondent has also carefully read,  
12 fully discussed with counsel, and understands the effects of this Stipulated Settlement and  
13 Disciplinary Order.

14 7. Respondent is fully aware of his legal rights in this matter, including the right to a  
15 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine  
16 the witnesses against him; the right to present evidence and to testify on his own behalf; the right  
17 to the issuance of subpoenas to compel the attendance of witnesses and the production of  
18 documents; the right to reconsideration and court review of an adverse decision; and all other  
19 rights accorded by the California Administrative Procedure Act and other applicable laws.

20 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and  
21 every right set forth above.

22 CULPABILITY

23 9. Respondent admits the truth of each and every charge and allegation in Accusation  
24 No. 800-2015-019463.

25 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to  
26 discipline and he agrees to be bound by the Board's probationary terms as set forth in the  
27 Disciplinary Order below.

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1 CONTINGENCY

2 11. This stipulation shall be subject to approval by the Medical Board of California.  
3 Respondent understands and agrees that counsel for Complainant and the staff of the Medical  
4 Board of California may communicate directly with the Board regarding this stipulation and  
5 settlement, without notice to or participation by Respondent or his counsel. By signing the  
6 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek  
7 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails  
8 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary  
9 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal  
10 action between the parties, and the Board shall not be disqualified from further action by having  
11 considered this matter.

12 12. The parties understand and agree that Portable Document Format (PDF) and facsimile  
13 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile  
14 signatures thereto, shall have the same force and effect as the originals.

15 13. In consideration of the foregoing admissions and stipulations, the parties agree that  
16 the Board may, without further notice or formal proceeding, issue and enter the following  
17 Disciplinary Order:

18 DISCIPLINARY ORDER

19 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 118998 issued  
20 to Respondent PAUL ANDREW COX, M.D. is revoked. However, the revocation is stayed and  
21 Respondent is placed on probation for seven (7) years on the following terms and conditions.

22 1. CONTROLLED SUBSTANCES - PARTIAL RESTRICTION Respondent shall not  
23 order, prescribe, dispense, administer, furnish, or possess any Schedule II or Schedule III  
24 controlled substances as defined by the California Uniform Controlled Substances Act, except in  
25 the perioperative setting when Respondent is acting as anesthesiologist for a patient where the  
26 patient will only use such controlled substances at the location of the procedure (i.e., the  
27 foregoing exception shall not apply to any controlled substances that are used outside of such  
28 perioperative setting). Respondent shall not issue an oral or written recommendation or approval

1 to a patient or a patient's primary caregiver for the possession or cultivation of marijuana for the  
2 personal medical purposes of the patient within the meaning of Health and Safety Code section  
3 11362.5. If Respondent forms the medical opinion, after an appropriate prior examination and  
4 medical indication, that a patient's medical condition may benefit from the use of marijuana,  
5 Respondent shall so inform the patient and shall refer the patient to another physician who,  
6 following an appropriate prior examination and medical indication, may independently issue a  
7 medically appropriate recommendation or approval for the possession or cultivation of marijuana  
8 for the personal medical purposes of the patient within the meaning of Health and Safety Code  
9 section 11362.5. In addition, Respondent shall inform the patient or the patient's primary  
10 caregiver that Respondent is prohibited from issuing a recommendation or approval for the  
11 possession or cultivation of marijuana for the personal medical purposes of the patient and that  
12 the patient or the patient's primary caregiver may not rely on Respondent's statements to legally  
13 possess or cultivate marijuana for the personal medical purposes of the patient. Respondent shall  
14 fully document in the patient's chart that the patient or the patient's primary caregiver was so  
15 informed. Nothing in this condition prohibits Respondent from providing the patient or the  
16 patient's primary caregiver information about the possible medical benefits resulting from the use  
17 of marijuana.

18 2. CONTROLLED SUBSTANCES - MAINTAIN RECORDS AND ACCESS TO  
19 RECORDS AND INVENTORIES. Respondent shall maintain a record of all controlled  
20 substances ordered, prescribed, dispensed, administered, or possessed by Respondent during  
21 probation, showing all of the following: 1) the name and address of the patient; 2) the date; 3) the  
22 character and quantity of controlled substances involved; and 4) the indications and diagnosis for  
23 which the controlled substances were furnished.

24 Respondent shall keep these records in a separate file or ledger, in chronological order. All  
25 records and any inventories of controlled substances shall be available for immediate inspection  
26 and copying on the premises by the Board or its designee at all times during business hours and  
27 shall be retained for the entire term of probation.

28 3. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain

1 completely from the personal use or possession of controlled substances as defined in the  
2 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and  
3 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not  
4 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide  
5 illness or condition. Within 15 calendar days of receiving any lawfully prescribed medications,  
6 Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and  
7 telephone number; medication name, strength, and quantity; and issuing pharmacy name, address,  
8 and telephone number.

9 4. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the  
10 use of products or beverages containing alcohol.

11 5. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective  
12 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in  
13 advance by the Board or its designee. Respondent shall provide the approved course provider  
14 with any information and documents that the approved course provider may deem pertinent.  
15 Respondent shall participate in and successfully complete the classroom component of the course  
16 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully  
17 complete any other component of the course within one (1) year of enrollment. The medical  
18 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
19 Medical Education (CME) requirements for renewal of licensure.

20 A medical record keeping course taken after the acts that gave rise to the charges in the  
21 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
22 or its designee, be accepted towards the fulfillment of this condition if the course would have  
23 been approved by the Board or its designee had the course been taken after the effective date of  
24 this Decision.

25 Respondent shall submit a certification of successful completion to the Board or its  
26 designee not later than 15 calendar days after successfully completing the course, or not later than  
27 15 calendar days after the effective date of the Decision, whichever is later.

28 6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of

1 the effective date of this Decision, Respondent shall enroll in a professionalism program, that  
2 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.  
3 Respondent shall participate in and successfully complete that program. Respondent shall  
4 provide any information and documents that the program may deem pertinent. Respondent shall  
5 successfully complete the classroom component of the program not later than six (6) months after  
6 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
7 time specified by the program, but no later than one (1) year after attending the classroom  
8 component. The professionalism program shall be at Respondent's expense and shall be in  
9 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

10 A professionalism program taken after the acts that gave rise to the charges in the  
11 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
12 or its designee, be accepted towards the fulfillment of this condition if the program would have  
13 been approved by the Board or its designee had the program been taken after the effective date of  
14 this Decision.

15 Respondent shall submit a certification of successful completion to the Board or its  
16 designee not later than 15 calendar days after successfully completing the program or not later  
17 than 15 calendar days after the effective date of the Decision, whichever is later.

18 7. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,  
19 Respondent shall submit to the Board or its designee for prior approval the name and  
20 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who  
21 has a doctoral degree in psychology and at least five years of postgraduate experience in the  
22 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall  
23 undergo and continue psychotherapy treatment, including any modifications to the frequency of  
24 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

25 The psychotherapist shall consider any information provided by the Board or its designee  
26 and any other information the psychotherapist deems relevant and shall furnish a written  
27 evaluation report to the Board or its designee. Respondent shall cooperate in providing the  
28 psychotherapist with any information and documents that the psychotherapist may deem

1 pertinent.

2 Respondent shall have the treating psychotherapist submit quarterly status reports to the  
3 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric  
4 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of  
5 probation, Respondent is found to be mentally unfit to resume the practice of medicine without  
6 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the  
7 period of probation shall be extended until the Board determines that Respondent is mentally fit  
8 to resume the practice of medicine without restrictions.

9 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

10 8. PSYCHIATRIC EVALUATION. Within 30 calendar days of the effective date of  
11 this Decision, and on whatever periodic basis thereafter may be required by the Board or its  
12 designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological  
13 testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall  
14 consider any information provided by the Board or designee and any other information the  
15 psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its  
16 designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not  
17 be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all  
18 psychiatric evaluations and psychological testing. Respondent shall comply with all restrictions or  
19 conditions recommended by the evaluating psychiatrist within 15 calendar days after being  
20 notified by the Board or its designee.

21 9. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the  
22 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice  
23 where: 1) Respondent merely shares office space with another physician but is not affiliated for  
24 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that  
25 location.

26 If Respondent fails to establish a practice with another physician or secure employment in  
27 an appropriate practice setting within 60 calendar days of the effective date of this Decision,  
28 Respondent shall receive a notification from the Board or its designee to cease the practice of



1 medicine within three (3) calendar days after being so notified. The Respondent shall not resume  
2 practice until an appropriate practice setting is established.

3 If, during the course of the probation, the Respondent's practice setting changes and the  
4 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent  
5 shall notify the Board or its designee within five (5) calendar days of the practice setting change.  
6 If Respondent fails to establish a practice with another physician or secure employment in an  
7 appropriate practice setting within 60 calendar days of the practice setting change, Respondent  
8 shall receive a notification from the Board or its designee to cease the practice of medicine within  
9 three (3) calendar days after being so notified. The Respondent shall not resume practice until an  
10 appropriate practice setting is established.

11 10. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)  
12 days of the effective date of this Decision, Respondent shall provide to the Board the names,  
13 physical addresses, mailing addresses, and telephone numbers of any and all employers and  
14 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's  
15 worksite monitor, and Respondent's employers and supervisors to communicate regarding  
16 Respondent's work status, performance, and monitoring. For purposes of this section,  
17 "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or  
18 equivalent, if applicable, when the Respondent has medical staff privileges.

19 11. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to  
20 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.  
21 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair  
22 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall  
23 make daily contact with the Board or its designee to determine whether biological fluid testing is  
24 required. Respondent shall be tested on the date of the notification as directed by the Board or its  
25 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at  
26 any time, including weekends and holidays. Except when testing on a specific date as ordered by  
27 the Board or its designee, the scheduling of biological fluid testing shall be done on a random  
28 basis. The cost of biological fluid testing shall be borne by the Respondent.

1 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.  
2 During the second year of probation and for the duration of the probationary term, up to five (5)  
3 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no  
4 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing  
5 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number  
6 of random tests to the first-year level of frequency for any reason.

7 Prior to practicing medicine, Respondent shall contract with a laboratory or service,  
8 approved in advance by the Board or its designee, that will conduct random, unannounced,  
9 observed, biological fluid testing and meets all of the following standards:

10 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry  
11 Association or have completed the training required to serve as a collector for the United  
12 States Department of Transportation.

13 (b) Its specimen collectors conform to the current United States Department of  
14 Transportation Specimen Collection Guidelines.

15 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published  
16 by the United States Department of Transportation without regard to the type of test  
17 administered.

18 (d) Its specimen collectors observe the collection of testing specimens.

19 (e) Its laboratories are certified and accredited by the United States Department of Health  
20 and Human Services.

21 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day  
22 of receipt and all specimens collected shall be handled pursuant to chain of custody  
23 procedures. The laboratory shall process and analyze the specimens and provide legally  
24 defensible test results to the Board within seven (7) business days of receipt of the  
25 specimen. The Board will be notified of non-negative results within one (1) business day  
26 and will be notified of negative test results within seven (7) business days.

27 (g) Its testing locations possess all the materials, equipment, and technical expertise  
28 necessary in order to test Respondent on any day of the week.

1 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens  
2 for the detection of alcohol and illegal and controlled substances.

3 (i) It maintains testing sites located throughout California.

4 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line  
5 computer database that allows the Respondent to check in daily for testing.

6 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff  
7 access to drug test results and compliance reporting information that is available 24 hours a  
8 day.

9 (l) It employs or contracts with toxicologists that are licensed physicians and have  
10 knowledge of substance abuse disorders and the appropriate medical training to interpret  
11 and evaluate laboratory biological fluid test results, medical histories, and any other  
12 information relevant to biomedical information.

13 (m) It will not consider a toxicology screen to be negative if a positive result is obtained  
14 while practicing, even if the Respondent holds a valid prescription for the substance.

15 Prior to changing testing locations for any reason, including during vacation or other travel,  
16 alternative testing locations must be approved by the Board and meet the requirements above.

17 The contract shall require that the laboratory directly notify the Board or its designee of  
18 non-negative results within one (1) business day and negative test results within seven (7)  
19 business days of the results becoming available. Respondent shall maintain this laboratory or  
20 service contract during the period of probation.

21 A certified copy of any laboratory test result may be received in evidence in any  
22 proceedings between the Board and Respondent.

23 If a biological fluid test result indicates Respondent has used, consumed, ingested, or  
24 administered to himself or herself a prohibited substance, the Board shall order Respondent to  
25 cease practice and instruct Respondent to leave any place of work where Respondent is practicing  
26 medicine or providing medical services. The Board shall immediately notify all of Respondent's  
27 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or  
28 provide medical services while the cease-practice order is in effect.

1 A biological fluid test will not be considered negative if a positive result is obtained while  
2 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited  
3 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

4 After the issuance of a cease-practice order, the Board shall determine whether the positive  
5 biological fluid test is in fact evidence of prohibited substance use by consulting with the  
6 specimen collector and the laboratory, communicating with the licensee, his or her treating  
7 physician(s), other health care provider, or group facilitator, as applicable.

8 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the  
9 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

10 For purposes of this condition, the term "prohibited substance" means an illegal drug, a  
11 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by  
12 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been  
13 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

14 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited  
15 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the  
16 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to  
17 any other terms or conditions the Board determines are necessary for public protection or to  
18 enhance Respondent's rehabilitation.

19 12. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of  
20 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its  
21 prior approval, the name of a substance abuse support group which he or she shall attend for the  
22 duration of probation. Respondent shall attend substance abuse support group meetings at least  
23 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance  
24 abuse support group meeting costs.

25 The facilitator of the substance abuse support group meeting shall have a minimum of three  
26 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed  
27 or certified by the state or nationally certified organizations. The facilitator shall not have a  
28 current or former financial, personal, or business relationship with Respondent within the last five

1 (5) years. Respondent's previous participation in a substance abuse group support meeting led by  
2 the same facilitator does not constitute a prohibited current or former financial, personal, or  
3 business relationship.

4 The facilitator shall provide a signed document to the Board or its designee showing  
5 Respondent's name, the group name, the date and location of the meeting, Respondent's  
6 attendance, and Respondent's level of participation and progress. The facilitator shall report any  
7 unexcused absence by Respondent from any substance abuse support group meeting to the Board,  
8 or its designee, within twenty-four (24) hours of the unexcused absence.

9 13. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty  
10 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or  
11 its designee for prior approval as a worksite monitor, the name and qualifications of one or more  
12 licensed physician and surgeon, other licensed health care professional if no physician and  
13 surgeon is available, or, as approved by the Board or its designee, a person in a position of  
14 authority who is capable of monitoring the Respondent at work.

15 The worksite monitor shall not have a current or former financial, personal, or familial  
16 relationship with Respondent, or any other relationship that could reasonably be expected to  
17 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its  
18 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite  
19 monitor, this requirement may be waived by the Board or its designee, however, under no  
20 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

21 The worksite monitor shall have an active unrestricted license with no disciplinary action  
22 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms  
23 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth  
24 by the Board or its designee.

25 Respondent shall pay all worksite monitoring costs.

26 The worksite monitor shall have face-to-face contact with Respondent in the work  
27 environment on as frequent a basis as determined by the Board or its designee, but not less than  
28 once per week; interview other staff in the office regarding Respondent's behavior, if requested

1 by the Board or its designee; and review Respondent's work attendance.

2 The worksite monitor shall verbally report any suspected substance abuse to the Board and  
3 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected  
4 substance abuse does not occur during the Board's normal business hours, the verbal report shall  
5 be made to the Board or its designee within one (1) hour of the next business day. A written  
6 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and  
7 any other information deemed important by the worksite monitor shall be submitted to the Board  
8 or its designee within 48 hours of the occurrence.

9 The worksite monitor shall complete and submit a written report monthly or as directed by  
10 the Board or its designee which shall include the following: (1) Respondent's name and  
11 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)  
12 the worksite monitor's license number, if applicable; (4) the location or location(s) of the  
13 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the  
14 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;  
15 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can  
16 lead to suspected substance abuse by Respondent. Respondent shall complete any required  
17 consent forms and execute agreements with the approved worksite monitor and the Board, or its  
18 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

19 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)  
20 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior  
21 approval, the name and qualifications of a replacement monitor who will be assuming that  
22 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a  
23 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the  
24 monitor, Respondent shall receive a notification from the Board or its designee to cease the  
25 practice of medicine within three (3) calendar days after being so notified. Respondent shall  
26 cease the practice of medicine until a replacement monitor is approved and assumes monitoring  
27 responsibility.

28 14. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING

1 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of  
2 probation.

3 A. If Respondent commits a major violation of probation as defined by section  
4 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take  
5 one or more of the following actions:

6 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical  
7 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of  
8 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice  
9 order issued by the Board or its designee shall state that Respondent must test negative for at least  
10 a month of continuous biological fluid testing before being allowed to resume practice. For  
11 purposes of determining the length of time a Respondent must test negative while undergoing  
12 continuous biological fluid testing following issuance of a cease-practice order, a month is  
13 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until  
14 notified in writing by the Board or its designee that he or she may do so.

15 (2) Increase the frequency of biological fluid testing.

16 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or  
17 other action as determined by the Board or its designee.

18 B. If Respondent commits a minor violation of probation as defined by section  
19 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take  
20 one or more of the following actions:

21 (1) Issue a cease-practice order;

22 (2) Order practice limitations;

23 (3) Order or increase supervision of Respondent;

24 (4) Order increased documentation;

25 (5) Issue a citation and fine, or a warning letter;

26 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in  
27 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of  
28 Regulations, at Respondent's expense;

1 (7) Take any other action as determined by the Board or its designee.

2 C. Nothing in this Decision shall be considered a limitation on the Board's authority  
3 to revoke Respondent's probation if he or she has violated any term or condition of probation. If  
4 Respondent violates probation in any respect, the Board, after giving Respondent notice and the  
5 opportunity to be heard, may revoke probation and carry out the disciplinary order that was  
6 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed  
7 against Respondent during probation, the Board shall have continuing jurisdiction until the matter  
8 is final, and the period of probation shall be extended until the matter is final.

9 15. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
10 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
11 Chief Executive Officer at every hospital where privileges or membership are extended to  
12 Respondent, at any other facility where Respondent engages in the practice of medicine,  
13 including all physician and locum tenens registries or other similar agencies, and to the Chief  
14 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
15 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
16 calendar days. This condition shall apply to any change(s) in hospitals, other facilities or  
17 insurance carrier.

18 16. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
19 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
20 advanced practice nurses, provided that, this prohibition from supervising physician assistants and  
21 advanced practice nurses shall expire after thirty-six (36) months from the effective date of this  
22 disciplinary order unless Respondent has failed to fully comply with any term or condition of  
23 probation during such thirty-six (36) month period.

24 17. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules  
25 governing the practice of medicine in California and remain in full compliance with any court  
26 ordered criminal probation, payments, and other orders.

27 18. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
28 under penalty of perjury on forms provided by the Board, stating whether there has been



1 compliance with all the conditions of probation.

2 Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
3 of the preceding quarter.

4 19. GENERAL PROBATION REQUIREMENTS.

5 Compliance with Probation Unit

6 Respondent shall comply with the Board's probation unit.

7 Address Changes

8 Respondent shall, at all times, keep the Board informed of Respondent's business and  
9 residence addresses, email address (if available), and telephone number. Changes of such  
10 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
11 circumstances shall a post office box serve as an address of record, except as allowed by Business  
12 and Professions Code section 2021(b).

13 Place of Practice

14 Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
15 of residence, unless the patient resides in a skilled nursing facility or other similar licensed  
16 facility.

17 License Renewal

18 Respondent shall maintain a current and renewed California physician's and surgeon's  
19 license.

20 Travel or Residence Outside California

21 Respondent shall immediately inform the Board or its designee, in writing, of travel to any  
22 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty  
23 (30) calendar days.

24 In the event Respondent should leave the State of California to reside or to practice,  
25 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
26 departure and return.

27 20. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
28 available in person upon request for interviews either at Respondent's place of business or at the

1 probation unit office, with or without prior notice throughout the term of probation.

2       21. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
3 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
4 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
5 defined as any period of time Respondent is not practicing medicine as defined in Business and  
6 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
7 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
8 Respondent resides in California and is considered to be in non-practice, Respondent shall  
9 comply with all terms and conditions of probation. All time spent in an intensive training  
10 program which has been approved by the Board or its designee shall not be considered non-  
11 practice and does not relieve Respondent from complying with all the terms and conditions of  
12 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
13 on probation with the medical licensing authority of that state or jurisdiction shall not be  
14 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
15 period of non-practice.

16       In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
17 months, Respondent shall successfully complete the Federation of State Medical Boards's Special  
18 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program  
19 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model  
20 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

21       Respondent's period of non-practice while on probation shall not exceed two (2) years.

22       Periods of non-practice will not apply to the reduction of the probationary term.

23       Periods of non-practice for a Respondent residing outside of California will relieve  
24 Respondent of the responsibility to comply with the probationary terms and conditions with the  
25 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
26 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or  
27 Controlled Substances; and Biological Fluid Testing.

28       22. COMPLETION OF PROBATION. Respondent shall comply with all financial

1 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
2 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
3 be fully restored.

4 23. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
5 of probation is a violation of probation. If Respondent violates probation in any respect, the  
6 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
7 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
8 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have  
9 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
10 the matter is final.

11 24. LICENSE SURRENDER. Following the effective date of this Decision, if  
12 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
13 the terms and conditions of probation, Respondent may request to surrender his or her license.  
14 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
15 determining whether or not to grant the request, or to take any other action deemed appropriate  
16 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
17 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
18 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
19 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
20 application shall be treated as a petition for reinstatement of a revoked certificate.

21 25. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
22 with probation monitoring each and every year of probation, as designated by the Board, which  
23 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
24 California and delivered to the Board or its designee no later than January 31 of each calendar  
25 year.

26 ///

27 ///

28 ///

1 ACCEPTANCE

2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
3 discussed it with my attorney, David M. Balfour Esq. I understand the stipulation and the effect it  
4 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and  
5 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
6 Decision and Order of the Medical Board of California.

7  
8 DATED: 8-16-18 Paul Cox

9 PAUL ANDREW COX, M.D.  
Respondent

10 I have read and fully discussed with Respondent PAUL ANDREW COX, M.D. the terms  
11 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary  
12 Order. I approve its form and content.

13 DATED: 8-16-18 David M Balfour

14 DAVID M. BALFOUR ESQ.  
Attorney for Respondent

15  
16 ENDORSEMENT

17 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully  
18 submitted for consideration by the Medical Board of California.

19 Dated:

20 8-17-18

Respectfully submitted,

21 XAVIER BECERRA  
22 Attorney General of California  
23 E. A. JONES III  
24 Supervising Deputy Attorney General

25 Edward Kim  
26 EDWARD KIM  
27 Deputy Attorney General  
28 Attorneys for Complainant

LA2018500409  
13215722

**Exhibit A**

**Accusation No. 800-2015-019463**

1 KAMALA D. HARRIS  
2 Attorney General of California  
3 E. A. JONES III  
4 Supervising Deputy Attorney General  
5 EDWARD KIM  
6 Deputy Attorney General  
7 State Bar No. 195729  
California Department of Justice  
300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
Telephone: (213) 269-6000  
Facsimile: (213) 897-9395  
*Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO March 15 20 18  
BY [Signature] ANALYST

8 BEFORE THE  
9 MEDICAL BOARD OF CALIFORNIA  
10 DEPARTMENT OF CONSUMER AFFAIRS  
11 STATE OF CALIFORNIA

12 In the Matter of the Accusation Against:

Case No. 800-2015-019463

13 PAUL ANDREW COX, M.D.  
14 4123 Boulder Creek Circle  
15 Stockton, CA 95219

ACCUSATION

16 Physician's and Surgeon's  
Certificate No. A118998,

Respondent.

17 Complainant alleges:

18 PARTIES

19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official  
20 capacity as the Executive Director of the Medical Board of California, Department of Consumer  
21 Affairs.

22 2. On or about November 9, 2011, the Medical Board of California issued Physician's  
23 and Surgeon's Certificate Number A118998 to Paul Andrew Cox, M.D. (Respondent). The  
24 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the  
25 charges brought herein and will expire on April 30, 2019, unless renewed.

26 JURISDICTION

27 3. This Accusation is brought before the Medical Board of California (Board),  
28 Department of Consumer Affairs, under the authority of the following laws. All section

1 references are to the Business and Professions Code unless otherwise indicated.

2 4. Section 2227 of the Code provides that a licensee who is found guilty under the  
3 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed  
4 one year, placed on probation and required to pay the costs of probation monitoring, or such other  
5 action taken in relation to discipline as the Board deems proper.

6 5. Section 2234 of the Code, states:

7 "The board shall take action against any licensee who is charged with unprofessional  
8 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not  
9 limited to, the following:

10 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the  
11 violation of, or conspiring to violate any provision of this chapter.

12 "(b) Gross negligence.

13 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or  
14 omissions. An initial negligent act or omission followed by a separate and distinct departure from  
15 the applicable standard of care shall constitute repeated negligent acts.

16 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate  
17 for that negligent diagnosis of the patient shall constitute a single negligent act.

18 "(2) When the standard of care requires a change in the diagnosis, act, or omission that  
19 constitutes the negligent act described in paragraph (1), including, but not limited to, a  
20 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the  
21 applicable standard of care, each departure constitutes a separate and distinct breach of the  
22 standard of care.

23 "(d) Incompetence.

24 "(e) The commission of any act involving dishonesty or corruption which is substantially  
25 related to the qualifications, functions, or duties of a physician and surgeon.

26 "(f) Any action or conduct which would have warranted the denial of a certificate.

27 "(g) The practice of medicine from this state into another state or country without meeting  
28 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not

1 apply to this subdivision. This subdivision shall become operative upon the implementation of the  
2 proposed registration program described in Section 2052.5.

3 “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and  
4 participate in an interview by the board. This subdivision shall only apply to a certificate holder  
5 who is the subject of an investigation by the board.”

6 6. Section 2239 of the Code states:

7 “(a) The use or prescribing for or administering to himself or herself, of any controlled  
8 substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic  
9 beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to  
10 any other person or to the public, or to the extent that such use impairs the ability of the licensee  
11 to practice medicine safely or more than one misdemeanor or any felony involving the use,  
12 consumption, or self-administration of any of the substances referred to in this section, or any  
13 combination thereof, constitutes unprofessional conduct. The record of the conviction is  
14 conclusive evidence of such unprofessional conduct.

15 “(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is  
16 deemed to be a conviction within the meaning of this section. The Division of Medical Quality<sup>1</sup>  
17 may order discipline of the licensee in accordance with Section 2227 or the Division of Licensing  
18 may order the denial of the license when the time for appeal has elapsed or the judgment of  
19 conviction has been affirmed on appeal or when an order granting probation is made suspending  
20 imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4  
21 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of  
22 not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint,  
23 information, or indictment.”

24 7. Section 822 of the Code, states:

25 “If a licensing agency determines that its licensee's ability to practice his or her profession  
26 safely is impaired because the licensee is mentally ill, or physically ill affecting competency, the

27  
28 <sup>1</sup> Pursuant to Business and Professions Code section 2002, “Division of Medical Quality”  
or “Division” shall be deemed to refer to the Medical Board of California.



1 licensing agency may take action by any one of the following methods:

2 “(a) Revoking the licentiate's certificate or license.

3 “(b) Suspending the licentiate's right to practice.

4 “(c) Placing the licentiate on probation.

5 “(d) Taking such other action in relation to the licentiate as the licensing agency in its  
6 discretion deems proper.

7 “The licensing agency shall not reinstate a revoked or suspended certificate or license until  
8 it has received competent evidence of the absence or control of the condition which caused its  
9 action and until it is satisfied that with due regard for the public health and safety the person's  
10 right to practice his or her profession may be safely reinstated.”

11 8. Section 2238 of the Code states:

12 “A violation of any federal statute or federal regulation or any of the statutes or regulations  
13 of this state regulating dangerous drugs or controlled substances constitutes unprofessional  
14 conduct.”

15 9. Section 11170 of the Health and Safety Code states:

16 “No person shall prescribe, administer, or furnish a controlled substance for himself.”

### 17 **FACTUAL ALLEGATIONS**

18 10. Respondent has a history of alcohol and illicit drug use. In or around 2013,  
19 Respondent began illicitly abusing, on an increasing frequency, opioid controlled substances  
20 without a prescription, including oxycodone, hydrocodone, dilaudid, demerol, and fentanyl. On  
21 or about December 9, 2015, Respondent illicitly used opioid medications. He has subsequently  
22 admitted to this use. He has been receiving treatment and counseling for his substance abuse.

### 23 **INTERVIEW**

24 11. On or about January 26, 2018, an investigator with the Department of Consumer  
25 Affairs interviewed Respondent. He admitted to using opioid drugs illicitly in or around 2014  
26 and 2015 and to abusing alcohol in or around 2014.

### 27 **PSYCHIATRIC EVALUATION**

28 12. On or about September 1, 2017, Dr. J.G., a board certified psychiatrist chosen by the

1 Board to evaluate Respondent, met with Respondent. Based upon her evaluation, Dr. J.G.  
2 concluded that Respondent should be subject to ongoing substance abuse treatment and random  
3 biological fluid screenings.

#### 4 **FIRST CAUSE FOR DISCIPLINE**

##### 5 **(Unable to Practice Safely Due to Mental/Physical Disorder)**

6 13. Respondent is subject to discipline pursuant to Business and Professions Code section  
7 822 in that his ability to practice medicine safely is impaired because he is mentally and/or  
8 physically ill in a manner affecting competency. The circumstances of Respondent's illnesses are  
9 as follows:

10 14. The allegations in paragraphs 10 through 12, inclusive, above are incorporated herein  
11 by reference as if fully set forth.

#### 12 **SECOND CAUSE FOR DISCIPLINE**

##### 13 **(Dangerous Use of and Self Use of Controlled Substances)**

14 15. Respondent is subject to disciplinary action under section 2239 of the Code, in that he  
15 used, prescribed, or administered to himself a controlled substance and/or alcoholic beverages, to  
16 the extent, or in such a manner as to be dangerous or injurious to himself, or to any other person  
17 or to the public, and/or to an extent that such use impaired his ability to practice medicine safely.  
18 The circumstances are as follows:

19 16. The allegations of the First Cause for Discipline are incorporated herein by reference  
20 as if fully set forth.

#### 21 **THIRD CAUSE FOR DISCIPLINE**

##### 22 **(Violation of Drug Statute)**

23 17. Respondent is subject to disciplinary action under section 2238 of the Code and  
24 sections 11170 of the Health and Safety Code in that Respondent administered a controlled  
25 substance to himself and unlawfully possessed a controlled substance. The circumstances are as  
26 follows:

27 18. The allegations of the First and Second Causes for Discipline are incorporated herein  
28 by reference as if fully set forth.

1 **FOURTH CAUSE FOR DISCIPLINE**

2 **(General Unprofessional Conduct)**

3 19. Respondent is subject to disciplinary action under section 2234 of the Code,  
4 generally, in that he committed unprofessional conduct. The circumstances are as follows:

5 20. The allegations of the First, Second and Third Causes for Discipline are incorporated  
6 herein by reference as if fully set forth.

7 **PRAYER**

8 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,  
9 and that following the hearing, the Medical Board of California issue a decision:

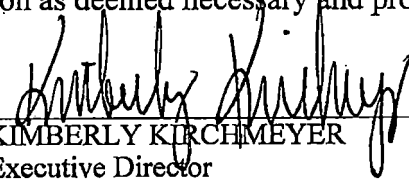
10 1. Revoking or suspending Physician's and Surgeon's Certificate Number A118998,  
11 issued to Paul Andrew Cox, M.D.;

12 2. Revoking, suspending or denying approval of Paul Andrew Cox, M.D.'s authority to  
13 supervise physician assistants and advanced practice nurses;

14 3. Ordering Paul Andrew Cox, M.D. to pay the Medical Board of California, if placed  
15 on probation, the costs of probation monitoring; and

16 4. Taking such other and further action as deemed necessary and proper.

17 DATED: March 15, 2018

18   
19 KIMBERLY KIRCHMEYER  
20 Executive Director  
21 Medical Board of California  
22 Department of Consumer Affairs  
23 State of California  
24 Complainant

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